

IN RE:

Case No. _____

Johnson, Bryant

Chapter **7**

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$ **1,000.00**

Prior to the filing of this statement I have received \$ **1,000.00**

Balance Due \$ **0.00**

2. The source of the compensation paid to me was: ☒ Debtor ☐ Other (specify):
3. The source of compensation to be paid to me is: ☐ Debtor ☐ Other (specify):
4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
 - e. [Other provisions as needed]
6. By agreement with the debtor(s), the above disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

September 20, 2007

Date

/s/ Thomas H. Senneff

Signature of Attorney

Thomas H. Senneff, Attorney

Name of Law Firm

**NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days **before** the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a “means test” designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in instalments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them,

using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Printed Name and title, if any, of Bankruptcy Petition Preparer
Address:

Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
(Required by 11 U.S.C. § 110.)

X _____
Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above.

Certificate of the Debtor

I (We), the debtor(s), affirm that I (we) have received and read this notice.

Johnson, Bryant
Printed Name(s) of Debtor(s)

X /s/ Bryant Johnson
Signature of Debtor

9/20/2007
Date

Case No. (if known) _____

X _____
Signature of Joint Debtor (if any)

Date

United States Bankruptcy Court Northern District of Illinois				Voluntary Petition																					
Name of Debtor (if individual, enter Last, First, Middle): Johnson, Bryant			Name of Joint Debtor (Spouse) (Last, First, Middle):																						
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):			All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):																						
Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all): 6384			Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all):																						
Street Address of Debtor (No. & Street, City, State & Zip Code): 1351 Chicago Ave Lot 3 Dixon, IL			Street Address of Joint Debtor (No. & Street, City, State & Zip Code):																						
ZIPCODE 61021			ZIPCODE																						
County of Residence or of the Principal Place of Business: Lee			County of Residence or of the Principal Place of Business:																						
Mailing Address of Debtor (if different from street address)			Mailing Address of Joint Debtor (if different from street address):																						
ZIPCODE			ZIPCODE																						
Location of Principal Assets of Business Debtor (if different from street address above):																									
ZIPCODE																									
Type of Debtor (Form of Organization) (Check one box.) <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.) _____		Nature of Business (Check one box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other _____ Tax-Exempt Entity (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).		Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.) <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding _____ Nature of Debts (Check one box) <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or house- hold purpose." <input type="checkbox"/> Debts are primarily business debts.																					
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.			Chapter 11 Debtors: Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2,190,000. ----- Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).																						
Statistical/Administrative Information <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.				THIS SPACE IS FOR COURT USE ONLY																					
Estimated Number of Creditors <table style="width: 100%; border-collapse: collapse;"><tr><td style="text-align: center;">1- 49</td><td style="text-align: center;">50- 99</td><td style="text-align: center;">100- 199</td><td style="text-align: center;">200- 999</td><td style="text-align: center;">1,000- 5,000</td><td style="text-align: center;">5,001- 10,000</td><td style="text-align: center;">10,001- 25,000</td><td style="text-align: center;">25,001- 50,000</td><td style="text-align: center;">50,001- 100,000</td><td style="text-align: center;">Over 100,000</td></tr><tr><td style="text-align: center;"><input checked="" type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr></table>						1- 49	50- 99	100- 199	200- 999	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	Over 100,000	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1- 49	50- 99	100- 199	200- 999			1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	Over 100,000														
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>														
Estimated Assets <table style="width: 100%; border-collapse: collapse;"><tr><td style="text-align: center;"><input checked="" type="checkbox"/> \$0 to \$10,000</td><td style="text-align: center;"><input type="checkbox"/> \$10,000 to \$100,000</td><td style="text-align: center;"><input type="checkbox"/> \$100,000 to \$1 million</td><td style="text-align: center;"><input type="checkbox"/> \$1 million to \$100 million</td><td style="text-align: center;"><input type="checkbox"/> More than \$100 million</td></tr></table>				<input checked="" type="checkbox"/> \$0 to \$10,000	<input type="checkbox"/> \$10,000 to \$100,000	<input type="checkbox"/> \$100,000 to \$1 million	<input type="checkbox"/> \$1 million to \$100 million	<input type="checkbox"/> More than \$100 million																	
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Estimated Liabilities <table style="width: 100%; border-collapse: collapse;"><tr><td style="text-align: center;"><input checked="" type="checkbox"/> \$0 to \$50,000</td><td style="text-align: center;"><input type="checkbox"/> \$50,000 to \$100,000</td><td style="text-align: center;"><input type="checkbox"/> \$100,000 to \$1 million</td><td style="text-align: center;"><input type="checkbox"/> \$1 million to \$100 million</td><td style="text-align: center;"><input type="checkbox"/> More than \$100 million</td></tr></table>				<input checked="" type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,000 to \$100,000	<input type="checkbox"/> \$100,000 to \$1 million	<input type="checkbox"/> \$1 million to \$100 million	<input type="checkbox"/> More than \$100 million																	
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Voluntary Petition (This page must be completed and filed in every case)		Name of Debtor(s): Johnson, Bryant	
Prior Bankruptcy Case Filed Within Last 8 Years (If more than one, attach additional sheet)			
Location Where Filed: None		Case Number:	Date Filed:
Location Where Filed:		Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)			
Name of Debtor: None		Case Number:	Date Filed:
District:		Relationship:	Judge:
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by § 342(b) of the Bankruptcy Code. <div style="display: flex; justify-content: space-between;"><div>X /s/ Thomas H. Senneff Signature of Attorney for Debtor(s)</div><div>9/20/07 Date</div></div>	
Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No			
Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached a made a part of this petition.			
Information Regarding the Debtor - Venue (Check any applicable box.) <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
Statement by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.) <input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) <div style="text-align: center; margin-bottom: 10px;">_____ (Name of landlord or lessor that obtained judgment)</div> <div style="text-align: center; margin-bottom: 10px;">_____ (Address of landlord or lessor)</div> <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.			

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Johnson, Bryant

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Bryant Johnson

Signature of Debtor

Bryant Johnson

X

Signature of Joint Debtor

(815) 284-9341

Telephone Number (If not represented by attorney)

September 20, 2007

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only **one** box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.

☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

X

Printed Name of Foreign Representative

Date

Signature of Attorney

X /s/ Thomas H. Senneff

Signature of Attorney for Debtor(s)

Thomas H. Senneff

Printed Name of Attorney for Debtor(s)

Thomas H. Senneff, Attorney

Firm Name

408 11 Ave

Address

Fulton, IL 61252

(815) 589-2929

Telephone Number

September 20, 2007

Date

Signature of Non-Attorney Petition Preparer

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

X

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

IN RE:

Case No. _____

Johnson, Bryant

Chapter 7

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE
WITH CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

☒ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

☐ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*

☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.]*

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

☐ 4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Bryant Johnson

Date: September 20, 2007

Certificate Number: 01267-ILN-CC-00224457**CERTIFICATE OF COUNSELING**I CERTIFY that on July 23, 2007, at 12:38 o'clock AM CDT,Bryant C. Johnson received fromMorcy Management International, Inc.

an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the

Northern District of Illinois, an individual [or group] briefing that complied

with the provisions of 11 U.S.C. §§ 109(h) and 111

a debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.This counseling session was conducted by internet and telephone.Date: July 23, 2007By: /s/Alexander KarandreasName: Alexander KarandreasTitle: Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

IN RE:

Case No. _____

Johnson, Bryant

Chapter 7

Debtor(s)

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NUMBER OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$ 0.00		
B - Personal Property	Yes	2	\$ 3,005.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 5,265.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		\$ 439.01	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	3		\$ 15,071.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			\$ 846.72
J - Current Expenditures of Individual Debtor(s)	Yes	1			\$ 2,249.00
TOTAL		14	\$ 3,005.00	\$ 20,775.01	

IN RE:

Case No. _____

Johnson, Bryant

Debtor(s)

Chapter 7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 439.01
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 439.01

State the following:

Average Income (from Schedule I, Line 16)	\$ 846.72
Average Expenses (from Schedule J, Line 18)	\$ 2,249.00
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20)	\$ 2,419.32

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 3,765.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 439.01	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 15,071.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 18,836.00

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H" for Husband, "W" for Wife, "J" for Joint or "C" for Community in the column labeled "HWJC." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	H W J C	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
None				
TOTAL			0.00	

(Report also on Summary of Schedules)

IN RE Johnson, Bryant

Case No. _____

Debtor(s)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H" for Husband, "W" for Wife, "J" for Joint, or "C" for Community in the column labeled "HWJC." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	H W J C	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		Debtor has no cash on hand.		0.00
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking account #19937084072 at USBank		5.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, include audio, video, and computer equipment.		One lot of ordinary household goods owned by debtor.		1,500.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		One lot of ordinary wearing apparel owned by debtor.		0.00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issue.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(3). 11 U.S.C. § 521(c); Rule 1007(b)).	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			

SCHEDULE B - PERSONAL PROPERTY

IN RE Johnson, Bryant

Case No. _____

Debtor(s)

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	H W J C	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
17. Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) in customer lists or similar compilations provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		Harley Davidson Motorcycle - 1981		1,500.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
TOTAL				3,005.00

0 continuation sheets attached

(Include amounts from any continuation sheets attached.
Report total also on Summary of Schedules.)

Case No. _____

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under:
(Check one box)

☐ Check if debtor claims a homestead exemption that exceeds \$136,875.

☐ 11 U.S.C. § 522(b)(2)

☒ 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
SCHEDULE B - PERSONAL PROPERTY			
Checking account #19937084072 at USBank	735 ILCS 5 §12-1001(b)	5.00	5.00
One lot of ordinary household goods owned by debtor.	735 ILCS 5 §12-1001(b)	1,500.00	1,500.00

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 9060376002384718 American General Finan 611 1st Ave Rock Falls, IL 61071		Installment account opened 9/06 - for 1981 motorcycle VALUE \$ 1,500.00				5,265.00	3,765.00
ACCOUNT NO.		 VALUE \$					
ACCOUNT NO.		 VALUE \$					
ACCOUNT NO.		 VALUE \$					
Subtotal (Total of this page)						\$ 5,265.00	\$ 3,765.00
Total (Use only on last page of the completed Schedule D. Report also on the Summary of Schedules, and if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						\$ 5,265.00	\$ 3,765.00

0 continuation sheets attached

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 or 13 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

- ☒ **Domestic Support Obligations**
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
- ☐ **Extensions of credit in an involuntary case**
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
- ☐ **Wages, salaries, and commissions**
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
- ☐ **Contributions to employee benefit plans**
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
- ☐ **Certain farmers and fishermen**
Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
- ☐ **Deposits by individuals**
Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
- ☐ **Taxes and Certain Other Debts Owed to Governmental Units**
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
- ☐ **Commitments to Maintain the Capital of an Insured Depository Institution**
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).
- ☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

1 continuation sheets attached

IN RE Johnson, Bryant

Case No. _____

Debtor(s)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Domestic Support Obligations

(Type of Priority for Claims Listed on This Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO. State Disbursement Unit PO Box 5400 Carol Stream, IL 60197-5400		For child support				439.01	439.01	
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								
ACCOUNT NO.								

Sheet no. 1 of 1 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

Subtotal
(Totals of this page)

\$ **439.01** \$ **439.01** \$

Total

(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)

\$ **439.01**

Total

(Use only on last page of the completed Schedule E. If applicable,
report also on the Statistical Summary of Certain Liabilities and Related Data.)

\$ **439.01** \$

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. <i>(See Instructions Above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 937507 Aba 300 1/2 South 2nd Clinton, IA 52733		Open account opened 4/03				1,075.00
ACCOUNT NO. 07 SC 751 ST Arnold D. Austin 504 1/2 Broadway Ave Sterling, IL 61081		Small Claims suit in Whiteside County Circuit Court				5,850.00
ACCOUNT NO. 412174143537 Cap One Bk Po Box 85520 Richmond, VA 23285		Revolving account opened 10/97				2,653.00
ACCOUNT NO. 1149065998 Credit Protect Assoc 1355 Noel Rd Suite 2100 Dallas, TX 75240		Installment account opened 9/04				70.00
Subtotal (Total of this page)						\$ 9,648.00
Total (Use only on last page of the completed Schedule F. Report also on the Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)						\$

2 continuation sheets attached

IN RE Johnson, Bryant

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Daniel Willsted 601 Ave. A Rock Falls, IL 61071		For personal loan given to debtor				1,000.00
ACCOUNT NO. Gary Swarts Pine Hill Road, PO Box 681 Sterling, IL 61081		For personal loan made to debtor.				177.00
ACCOUNT NO. 585757 Jc Penney Po Box 981402 El Paso, TX 79998		Revolving account opened 11/99				682.00
ACCOUNT NO. Marc Batley 301 5th Ave Sterling, IL 61081		For personal loan given to debtor.				1,400.00
ACCOUNT NO. 3355871 Mutual Management 401 E State St Rockford, IL 61104		Open account opened 3/02				467.00
ACCOUNT NO. 3867158 Mutual Management 401 E State St Rockford, IL 61104		Open account opened 7/02				151.00
ACCOUNT NO. 21499203376920 National Act Pob 44207 Madison, WI 53744		Open account opened 4/03				236.00

Sheet no. 1 of 2 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **4,113.00**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.)

Total
\$

IN RE Johnson, Bryant

Case No. _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 0661014763758 Sherman Acquisitions Po Box 740281 Houston, TX 77274		Open account opened 9/04				478.00
ACCOUNT NO. 0405004 Sterling Fed Pob 617 Sterling, IL 61081		Open account opened 3/92				832.00
ACCOUNT NO.						
ACCOUNT NO.						
ACCOUNT NO.						
ACCOUNT NO.						
ACCOUNT NO.						
ACCOUNT NO.						

Sheet no. 2 of 2 continuation sheets attached to
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) \$ **1,310.00**

(Use only on last page of the completed Schedule F. Report also on
the Summary of Schedules, and if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.)

Total
\$ **15,071.00**

IN RE Johnson, Bryant

Case No. _____

Debtor(s)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R. Bankr. P. 1007(m).

☒ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

IN RE Johnson, Bryant

Case No. _____

Debtor(s)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

Debtor(s)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

Debtor's Marital Status Single	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP(S): Son Daughter	AGE(S): 16 14
EMPLOYMENT: DEBTOR		SPOUSE
Occupation Welder Name of Employer Woods Equipment How long employed 4 years Address of Employer 2606 IL Rt 2 Oregon, IL 61061		

INCOME: (Estimate of average or projected monthly income at time case filed)	DEBTOR	SPOUSE
1. Current monthly gross wages, salary, and commissions (prorate if not paid monthly)	\$ <u>1,290.40</u>	\$ _____
2. Estimated monthly overtime	\$ <u>86.39</u>	\$ _____
3. SUBTOTAL	\$ <u>1,376.79</u>	\$ _____
4. LESS PAYROLL DEDUCTIONS		
a. Payroll taxes and Social Security	\$ <u>302.47</u>	\$ _____
b. Insurance	\$ <u>4.50</u>	\$ _____
c. Union dues	\$ _____	\$ _____
d. Other (specify) Medical	\$ <u>20.48</u>	\$ _____
Child Support	\$ <u>202.62</u>	\$ _____
5. SUBTOTAL OF PAYROLL DEDUCTIONS	\$ <u>530.07</u>	\$ _____
6. TOTAL NET MONTHLY TAKE HOME PAY	\$ <u>846.72</u>	\$ _____
7. Regular income from operation of business or profession or farm (attach detailed statement)	\$ _____	\$ _____
8. Income from real property	\$ _____	\$ _____
9. Interest and dividends	\$ _____	\$ _____
10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above	\$ _____	\$ _____
11. Social Security or other government assistance	\$ _____	\$ _____
(Specify) _____	\$ _____	\$ _____
12. Pension or retirement income	\$ _____	\$ _____
13. Other monthly income	\$ _____	\$ _____
(Specify) _____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
14. SUBTOTAL OF LINES 7 THROUGH 13	\$ _____	\$ _____
15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14)	\$ <u>846.72</u>	\$ _____
16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15; if there is only one debtor repeat total reported on line 15)	\$ <u>846.72</u>	

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:
None

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor’s family at time case filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor’s spouse maintains a separate household. Complete a separate schedule of expenditures labeled “Spouse.”

1. Rent or home mortgage payment (include lot rented for mobile home)	\$ 210.00
a. Are real estate taxes included? Yes No <input checked="" type="checkbox"/>	
b. Is property insurance included? Yes No <input checked="" type="checkbox"/>	
2. Utilities:	
a. Electricity and heating fuel	\$ 100.00
b. Water and sewer	\$
c. Telephone	\$ 70.00
d. Other	\$
3. Home maintenance (repairs and upkeep)	\$
4. Food	\$ 300.00
5. Clothing	\$ 300.00
6. Laundry and dry cleaning	\$ 300.00
7. Medical and dental expenses	\$ 40.00
8. Transportation (not including car payments)	\$ 160.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$ 250.00
10. Charitable contributions	\$ 40.00
11. Insurance (not deducted from wages or included in home mortgage payments)	
a. Homeowner’s or renter’s	\$ 6.00
b. Life	\$
c. Health	\$ 160.00
d. Auto	\$ 100.00
e. Other	\$
12. Taxes (not deducted from wages or included in home mortgage payments)	
(Specify) Car Tags	\$ 13.00
13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan)	
a. Auto	\$
b. Other Motorcycle	\$ 200.00
14. Alimony, maintenance, and support paid to others	\$
15. Payments for support of additional dependents not living at your home	\$
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$
17. Other	\$

18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.

\$ 2,249.00

19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing of this document:

None

20. STATEMENT OF MONTHLY NET INCOME	
a. Average monthly income from Line 15 of Schedule I	\$ 846.72
b. Average monthly expenses from Line 18 above	\$ 2,249.00
c. Monthly net income (a. minus b.)	\$ -1,402.28

Debtor(s)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 16 sheets (*total shown on summary page plus 2*), and that they are true and correct to the best of my knowledge, information, and belief.

Date: September 20, 2007 Signature: /s/ Bryant Johnson
Bryant Johnson Debtor

Date: _____ Signature: _____
(Joint Debtor, if any)
[If joint case, both spouses must sign.]

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer _____ Social Security No. (Required by 11 U.S.C. § 110.) _____
If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.

Address

Signature of Bankruptcy Petition Preparer _____ Date _____

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the _____ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the _____ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets (*total shown on summary page plus 1*), and that they are true and correct to the best of my knowledge, information, and belief.

Date: _____ Signature: _____

(Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

IN RE:

Johnson, Bryant

Case No. _____

Chapter 7

Debtor(s)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. Do not include the name or address of a minor child in this statement. Indicate payments, transfers and the like to minor children by stating "a minor child." See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

- None ☐ State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
3,208.00	2004 Federal Tax Return - \$-49.00
	2005 Federal Tax Return - \$1,523.00
	2006 Federal Tax Return - \$1,734.00

2. Income other than from employment or operation of business

- None ☒ State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

3. Payments to creditors

Complete a, or b., as appropriate, and c.

- None ☒ a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☐ b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,475. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

4. Suits and administrative proceedings, executions, garnishments and attachments

None ☐ a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT

AND CASE NUMBER

ARNOLD D. AUSTIN, Plaintiff, vs. Contract Dispute

BRYANT C. JOHNSON,

Defendant

No. 07 SC751 ST Claim Amount

\$5,850.00 Plus Costs

COURT OR AGENCY

AND LOCATION

**Circuit Court of Fourteenth
Judicial Circuit - Whiteside
County, Illinois**

STATUS OR

DISPOSITION

**First Appearance
9/24/07**

None ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

5. Repossessions, foreclosures and returns

None ☒ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

6. Assignments and receiverships

None ☒ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

7. Gifts

None ☒ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

8. Losses

None ☒ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

9. Payments related to debt counseling or bankruptcy

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Thomas H. Senneff

408 11th Ave

Fulton, IL 61252

DATE OF PAYMENT, NAME OF

PAYOR IF OTHER THAN DEBTOR

7/31/7

AMOUNT OF MONEY OR DESCRIPTION

AND VALUE OF PROPERTY

1,000.00

For counseling, presentation and representation in Chapter 7 bankruptcy proceeding.

10. Other transfers

None ☒ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

11. Closed financial accounts

None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

12. Safe deposit boxes

None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs

None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

None ☒ List all property owned by another person that the debtor holds or controls.

15. Prior address of debtor

None ☒ If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

16. Spouses and Former Spouses

None ☒ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None ☒ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None ☒ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None ☒ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

None ☒ a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

None ☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date: September 20, 2007 Signature /s/ Bryant Johnson
of Debtor **Bryant Johnson**

Date: _____ Signature _____
of Joint Debtor
(if any)

_____ **0** continuation pages attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

IN RE:

Johnson, Bryant

Debtor(s)

Case No. _____

Chapter 7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

- ☒ I have filed a schedule of assets and liabilities which includes debts secured by property of the estate.
☐ I have filed a schedule of executory contracts and unexpired leases which includes personal property subject to an unexpired lease.
☒ I intend to do the following with respect to the property of the estate which secures those debts or is subject to a lease:

Description of Secured Property	Creditor's Name	Property will be Surrendered	Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c)
Harley Davidson Motorcycle - 1981	American General Finan				✓

Description of Leased Property	Lessor's Name	Lease will be assumed pursuant to 11 U.S.C. § 362(h)(1)(A)

09/20/2007

/s/ Bryant Johnson

Date

Bryant Johnson

Debtor

Joint Debtor (if applicable)

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer

Social Security No. (Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document.

Address

Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

IN RE:

Case No. _____

Johnson, Bryant _____

Chapter **7** _____

Debtor(s)

VERIFICATION OF CREDITOR MATRIX

Number of Creditors **14**

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: **September 20, 2007** _____

/s/ Bryant Johnson _____

Debtor

Joint Debtor

Johnson, Bryant
1351 Chicago Ave Lot 3
Dixon, IL 61021

Marc Batley
301 5th Ave
Sterling, IL 61081

Thomas H. Senneff, Attorney
408 11 Ave
Fulton, IL 61252

Mutual Management
401 E State St
Rockford, IL 61104

Aba
300 1/2 South 2nd
Clinton, IA 52733

National Act
Pob 44207
Madison, WI 53744

American General Finan
611 1st Ave
Rock Falls, IL 61071

Sherman Acquisitions
Po Box 740281
Houston, TX 77274

Arnold D. Austin
504 1/2 Broadway Ave
Sterling, IL 61081

State Disbursement Unit
PO Box 5400
Carol Stream, IL 60197-5400

Cap One Bk
Po Box 85520
Richmond, VA 23285

Sterling Fed
Pob 617
Sterling, IL 61081

Credit Protect Assoc
1355 Noel Rd Suite 2100
Dallas, TX 75240

Daniel Willsted
601 Ave. A
Rock Falls, IL 61071

Gary Swarts
Pine Hill Road, PO Box 681
Sterling, IL 61081

Jc Penney
Po Box 981402
El Paso, TX 79998

										Check No. : A02884		Check Date : 2/20/2007		Period Ending : 2/17/2007		Pay Frequency : Biweekly					
JOHNSON, BRYANT D PO BOX 145		ID Number: Base Rate:		00101803 15.00		FED: ST1:		Status SINGLE		Exempt 0		Tax Adjustments FED: DI/UC:		\$5		ST:		State and Local Codes PRI: IL LOC1:		LOC3:	
BXON IL 61071		SSN:				ST2:						Local:						SEC: LOC2:		LOC4: LOC5:	
Important Message																					

Ceridian HR Payroll

Page 1 of 1

										Check No : A23313			
										Check Date : 12/23/17			
										Period Ending : 12/31/17			
										Pay Frequency : Bi-Weekly			
EDMONSON, BRYAN D PO BOX 114										ID Number: 001703471			
DIXON, J. STEVE										Base Rate: 13.12			
										FED: ST1: ST2:			
										Status: SINGLE			
										Exempt: 1			
										Tax Adjustments: FED: OMUC: Local:			
										55			
										ST: PRI: SEC: LOC1: LOC2: LOC3: LOC4: LOC5:			
Important Message													

Check No : 473137 Check Date : 03/02/2007 Period Ending : 03/2007 Pay Frequency : Bi-weekly																																																																																																																																																																																																																	
JOHNSON, DRYANT C PO BOX 155		ID Number: 0297361873 Base Rate: 15.10	FED: ST1: ST2:	Status: SINGLE Exempt: 0	Tax Adjustments: FED: DRUC: Local:	\$: ST:	State and Local Codes: PRI: 3 LOC1: SEC: LOC2: LOC3: LOC4: LOC5:																																																																																																																																																																																																										
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<table border="1"> <thead> <tr> <th colspan="4">Hours and Earnings</th> <th colspan="4">Taxes and Deductions</th> <th colspan="2">Special Information</th> </tr> <tr> <th></th> <th>Current</th> <th>YTD</th> <th></th> <th>Description</th> <th>Current Amount</th> <th>YTD Amount</th> <th></th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td>VACATION</td> <td>5.00</td> <td>104.00</td> <td>374.40</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>97.00</td> </tr> <tr> <td>OT SHIF</td> <td>15.00</td> <td>145.00</td> <td>30.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>00</td> </tr> <tr> <td>REG SHIF</td> <td>41.00</td> <td>1,110.00</td> <td>402.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>51.00</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>SO SEC TAX</td> <td></td> <td>103.51</td> <td>480.95</td> <td></td> <td>79</td> </tr> <tr> <td>HOLIDAY</td> <td>0.00</td> <td>0.00</td> <td>32.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>00</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>MEDICARE TAX</td> <td></td> <td>94.01</td> <td>110.14</td> <td></td> <td>00</td> </tr> <tr> <td>Total H/E</td> <td>118.00</td> <td>1,692.59</td> <td>544.00</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>00</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>FED INC TAX</td> <td></td> <td>231.12</td> <td>1,051.01</td> <td></td> <td>00</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>PR-STATE TAX</td> <td></td> <td>50.09</td> <td>30.40</td> <td></td> <td>00</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>Total Taxes</td> <td></td> <td>408.33</td> <td>1,856.29</td> <td></td> <td></td> </tr> <tr> <td colspan="4">Pre-Tax Earnings</td> <td colspan="4">After Tax Deductions</td> <td colspan="2">Current Net Pay Distribution</td> </tr> <tr> <td>MEDICAL</td> <td></td> <td>15.00</td> <td>32.00</td> <td>CHILD SUPPORT</td> <td></td> <td>202.62</td> <td>1,013.10</td> <td colspan="2">Total Net Pay Distribution</td> </tr> <tr> <td>RENTAL</td> <td></td> <td>0.00</td> <td>20.00</td> <td></td> <td></td> <td></td> <td></td> <td colspan="2">1,058.00</td> </tr> <tr> <td>Total Pre-Tax</td> <td></td> <td>-23.00</td> <td>-115.15</td> <td></td> <td></td> <td></td> <td></td> <td colspan="2"></td> </tr> <tr> <td>Total</td> <td></td> <td>1,669.57</td> <td>7,747.25</td> <td>Total Per Deduction</td> <td></td> <td>202.62</td> <td>1,013.10</td> <td colspan="2"></td> </tr> <tr> <td colspan="4">Earnings</td> <td colspan="4">Deductions</td> <td colspan="2">Gross Pay</td> </tr> <tr> <td>Current</td> <td>1,669.57</td> <td>402.00</td> <td>1,669.57</td> <td>Loss Taxes</td> <td>103.51</td> <td>202.62</td> <td>1,466.02</td> <td colspan="2"></td> </tr> <tr> <td>YTD</td> <td>1,669.57</td> <td>1,151.00</td> <td>7,747.25</td> <td>Loss Deduct</td> <td>1,013.10</td> <td>4,047.48</td> <td></td> <td>Total Current Net Pay</td> <td>1,058.00</td> </tr> </tbody> </table>										Hours and Earnings				Taxes and Deductions				Special Information			Current	YTD		Description	Current Amount	YTD Amount				VACATION	5.00	104.00	374.40						97.00	OT SHIF	15.00	145.00	30.00						00	REG SHIF	41.00	1,110.00	402.00						51.00					SO SEC TAX		103.51	480.95		79	HOLIDAY	0.00	0.00	32.00						00					MEDICARE TAX		94.01	110.14		00	Total H/E	118.00	1,692.59	544.00						00					FED INC TAX		231.12	1,051.01		00					PR-STATE TAX		50.09	30.40		00					Total Taxes		408.33	1,856.29			Pre-Tax Earnings				After Tax Deductions				Current Net Pay Distribution		MEDICAL		15.00	32.00	CHILD SUPPORT		202.62	1,013.10	Total Net Pay Distribution		RENTAL		0.00	20.00					1,058.00		Total Pre-Tax		-23.00	-115.15							Total		1,669.57	7,747.25	Total Per Deduction		202.62	1,013.10			Earnings				Deductions				Gross Pay		Current	1,669.57	402.00	1,669.57	Loss Taxes	103.51	202.62	1,466.02			YTD	1,669.57	1,151.00	7,747.25	Loss Deduct	1,013.10	4,047.48		Total Current Net Pay	1,058.00
Hours and Earnings				Taxes and Deductions				Special Information																																																																																																																																																																																																									
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Ceridian HR Payroll Page 1 of 1Page 1 of 1

JOHNSON, BRYAN D PO BOX 152 DIXON, IL 61501										Check No.: A25263 Check Date: 5/3/2017 Period Ending: 4/14/2017 Pay Frequency: Biweekly									
ID Number: 0007961873 Base Rate: 15.10 SSN:				FED: ST1: ST2:		Status: SINGLE Exempt: 0		Tax Adjustments FED: \$5 DRUC: Local:		ST: IL LOC1: SEC: LOC2:		LOC3: LOC4: LOC5:							
Important Message																			
Hours and Earnings																			
Current YTD				Taxes and Deductions				Special Information											
REG SHIFT 74.25 1,158.00 109.75 11,064.83				Description Current Amount YTD Amount				VACATION BALANCE 50.00											
VACATION 0.00 0.00 57.00 559.29								VACATION ACCR CUR 00											
HOLIDAY 0.00 0.00 48.00 448.80				SD SEC TAX 00.00 734.52				VACATION ACCR YTD 40.00											
OT SHIFT 0.00 0.00 0.00 0.00				MEDICARE TAX 16.17 135.22				VACATION CASAL 00											
Total HVE 74.25 1,158.00 880.25 13,022.10				FED INC TAX 1,823.58 1,823.58				VACATION CAACUR 00											
				PRI-STATE TAX 81.00 284.45				VACATION CAACYTD 50											
				Total Taxes 246.94 2,985.29															
Pre-Tax Deductions				After Tax Deductions				Current Net Pay Distribution											
MEMORIAL 18.50 186.87				CHILD SUPPORT 202.62 1,823.58				0 100% 0% 0% 0%											
DCNTR 14.00 130.97																			
Total Pre-Tax -23.03 -207.27																			
Total 1,135.27 12,814.83				Total Per Deduction 202.62 1,823.58															
Earnings				Less Taxes				Total Current Net Pay											
Current 1,158.00 73.03 1,135.27				Less Taxes 246.94 2,985.29				685.71											
YTD 13,022.10 -207.27 12,814.83				Less Taxes 1,823.58 1,823.58															

										Check No.: A28104 Check Date: 5/11/2007 Period Ending: 5/11/2007 Pay Frequency: Bi-Weekly						
JOHNSON, BRYAN E O PO BOX 155 DIXON, IL 61021		ID Number: Base Rate: SSN:	229 026103 14.10		FED: ST1: ST2:	Status SINGLC	Exempt 1 0	Tax Adjustments FED: DIUC: Local:		\$5	ST:	State and Local Codes PRI: SEC:		LOC1: LOC2:	LOC3: LOC4: LOC5:	
Important Message																
Hours and Earnings				Taxes and Deductions				Social Security Information								
Current		YTD		Current		YTD		Current		YTD		Current		YTD		
VACATION		16.00	219.00	43.00	710.51	Description		Amount	Amount	VACATION BALANCE		60.00		60.00		
REG SHIFT		84.00	595.40	773.25	12,062.72					VACATION ACCR CUR		60.00		60.00		
HOLIDAY		0.00	0.00	44.00	948.00	SO SEC TAX		75.05	570.47	VACATION CABA		0.00		0.00		
O/T SHIFT		0.00	0.00	31.00	759.00	MEDICARE TAX		17.78	202.55	VACATION CAABWOLA		0.00		0.00		
Total H/E		90.00	1,248.00	960.25	14,270.10	FED INC TAX		139.48	1,753.28	VACATION CAABWOLA YTD		0.00		0.00		
						PRI-STATE TAX		38.75	421.21							
						Total Taxes		269.94	3,255.23							
Pre-Tax Items				After Tax Credit Items				General Net Pay Distribution								
MEDICARI			12.55	-125.11	CHFD SUPPRT			202.62	-2,026.20	C - 159.07		11.11%		12.41		
DENTAL			4.00	-41.00												
Total Pre-Tax			-23.00	-230.00												
Total		1,224.97	14,039.80	Total Per Deduction			202.62	2,026.20								
Earnings		Gross Pay		FICA Gross		Less Taxes		Less Credits		Net Pay						
Current		1,113.00	23.05	1,014.47	269.94	202.62		751.11								
YTD		12,249.00	430.35	11,009.00	3,255.23	2,026.20		7,753.37		Total Current Net Pay				752.41		

										Check No : A27235	
										Check Date : 8/14/2007	
										Period Ending : 8/9/2007	
										Pay Frequency : Bi-weekly	
JOHNSON, BRYANT C PO BOX 159		ID Number: Base Rate: SSN:	1507181473 15112	FED: ST1: ST2:	Status: SINGLE	Exempt: 1 0	Tax Adjustments FED: DI/UC: Local:	35	State and Local Codes		
DIXON, IL 61021									ST:	PRI: SEC:	LOC1: LOC2: LOC3: LOC4: LOC5:
Important Message											
Hours and Earnings				Taxes and Deductions				Special Information			
	Current		YTD		Description	Current Amount	YTD Amount				
HOLIDAY	8.00	1,248.00	15,112.00	4,148.00				VACATION BALANCE		34.00	
REG SH FT	73.00	1,143.00	357.00	14,133.00				VACATION ACCR CUR		.00	
VACATION	0.00	0.00	14.00	718.00	SO SHG TAX	15.94	17,122.00	VACAT ON ACCR YTD		32.00	
OT SH FT	0.00	0.00	0.00	119.00	MEDICARE TAX	17.75	1,035.11	VACATION CABAL		.00	
Total H/E	80.00	1,248.00	1,120.25	16,766.10	FED INC TAX	139.43	7,138.94	VACATION CAACCUR		.00	
					PRI-STATE TAX	35.70	184.70	VACATION CAACYTD		.00	
					Total Taxes	269.93	3,795.10				
				Other Tax Deductions				Special Net Pay Deductions			
MEDICAL			13.63	107.98	CHILD SUPPORT	202.62	2,431.44	C 103070001072		752.42	
DENTAL			4.00	34.00							
Total Pre-Tax			-23.03	-276.36							
Total		1,224.97	16,489.74	Total Per Deduction		202.62	2,431.44				
Current	1,248.00	24.10	1,224.97	269.93	202.62	752.42					
YTD	16,766.10	-276.36	16,489.74	4,795.10	2,431.44	12,263.23	Total Current Net Pay			752.42	

							Check No : A07773
							Check Date : 8-23-2007
							Period Ending : 8-23-2007
							Pay Frequency : Bi-weekly
JOHNSON, BRYANT C PO BOX 164 DIXON, IL 61021		ID Number: Base Rate: SSN:	A07981473 15.10 	FED: ST1: ST2:	Status SINGLE Exempt 1 0	Tax Adjustments FED: DIUC: Local:	\$5 ST: PRI: IL LOC1: SEC: LOC2: LOC3: LOC4: LOC5:
Important Message							
		Rounds & Earnings			Taxes and Deductions		Special Information
		Current	YTD		Current	YTD	
REG SHIFT	33.00	1,248.00	1,200.25	15,831.33	Description	Amount	VACAT ON BALANCE 34.00
VACATION	1.00	0.00	48.00	749.80			VACATION ACCR CUR .00
HOLIDAY	0.00	0.00	60.00	373.80	SO SEC TAX	75.05	VACATION ACCR YTD 82.00
OT SHIF	1.00	0.00	0.00	59.80	MEDICARE TAX	17.79	VACATION CABAL .00
Total H/E	80.00	1,248.00	1,200.25	18,014.10	FED INC TAX	139.48	VACATION CAACCUR .00
					PR STATE TAX	50.75	VACATION CAACYTD .00
					Total Taxes	269.34	
						1,065.04	
		Prepayments			After Tax Deductions		Current Net Pay Distribution
MEDICAL		-12.53	-112.53		CHILD SUPPORT	-267.62	C - 18231251472 752.41
DENTAL		-0.00	-0.00				
Total Pre-Tax		-23.03	-299.39				
Total		1,224.97	17,714.71	Total Per Deduction	202.62	2,634.06	
	Earnings	Taxable	Non Taxable	Less Taxes	Less Debits	Gross Net Pay	
Current	1,248.00	1,173.73	1,024.97	269.34	202.62	752.41	
YTD	18,014.10	1,200.25	17,714.71	4,365.04	2,634.06	11,215.61	Total Current Net Pay 752.41

										Check No : A28310 Check Date : 7/12/2007 Period Ending : 7/7/2007 Pay Frequency : Bi-weekly			
JOHNSON, BRYANT C		ID Number: 3267051873		Status: SINGLE		Exempt: 1		Tax Adjustments: \$0		State and Local Codes: PRI: IL		LOC1: LOC3:	
PO BOX 153		Base Rate: 15.10		ST1:		0		FED: DUC:		SEC: LOC2:		LOC4: LOC5:	
DIXON, IL 61801		SSN:		ST2:				Local:					
Important Message													
Hours and Earnings				Taxes and Deductions				Special Information					
Current YTD				Current YTD									
HOLIDAY 24.00 374.40 50.00 1,246.00				Description Amount				VACATION BALANCE 18.00					
OT SHIFT 2.00 15.60 30.00 475.40								VACATION ACCR CUR 00					
VACATION 18.00 219.60 50.00 935.10				SO SEC TAX 73.35 1,177.18				VACATION ACCR YTD 52.00					
REG SHIFT 42.00 639.00 1,311.10 18,337.10				MED CARE TAX 18.44 175.30				VACATION CABAL 00					
Total H/E 84.00 1,294.90 1,284.25 19,308.90				FED INC TAX 148.70 2,324.92				VACATION CAACUR 00					
				PRI-STATE TAX 38.15 569.65				VACATION CAACYTD 00					
				Total Taxes 281.94 4,346.98									
Post-Tax Earnings				After Tax Deductions				Current Net Pay Distribution					
MEDICAL 10.50 155.12				CHILD SUPPORT 202.62 2,836.63				C 199375874072 737.21					
DENTAL 4.00 62.00													
Total Pre-Tax 23.03 322.42													
Total 1,271.77 19,986.48				Total Per Deduction 202.62 2,836.68									
Earnings Pre-Tax Post-Tax				Less Taxes Less Taxes EO Net Pay									
Current 1,204.32 1,190.20 1,271.77				281.94 282.62 757.21									
YTD 19,406.70 19,224.41 19,986.48				4,346.98 4,336.63 11,452.87				Total Current Net Pay 787.21					

										Check No : A28842											
										Check Date : 7/26/2007											
										Period Ending : 7/21/2007											
										Pay Frequency : Bi-weekly											
JOHNSON BRYANT C PO BOX 158 DIXON IL 61021										ID Number: Base Rate: SSN:	0111091873 15.65		FED: ST1: ST2:	Status SINGLE	Exempt 1 0	Tax Adjustments FED: DI/UC: Local:	\$	ST:	State and Local Codes PRI: IL LOC1: SEC: LOC2: LOC3: LOC4: LOC5:		
Important Message																					
Hours and Earnings										Taxes and Deductions						Special Information					
Current										YTD		Description		Current		YTD					
														Amount		Amount					
RETRO PAY										0.00	48.39	1.00	39.33					VACATION BALANCE		18.00	
REG SHIFT										80.00	1,298.40	1,121.28	17,837.50					VACATION ACCR CUR		.00	
VACATION										0.00	0.00	84.00	999.40	SD SEC TAX		83.41	1,280.97	VACATION ACCR YTD		82.00	
HOLIDAY										0.00	0.00	80.00	1,048.00	MEDICARE TAX		19.51	294.91	VACATION CACBAL		.00	
OT SHIFT										0.00	0.00	79.00	779.40	FED INC TAX		158.50	2,468.42	VACATION CAACCUR		.00	
Total H/E										80.00	1,376.79	1,364.25	20,685.69	PR-STATE TAX		10.55	610.15	VACATION CAACYTD		.00	
														Total Taxes		302.47	4,649.45				
Pre-Tax Deductions												After Tax Deductions		Current Net Pay Distribution							
MED CAL											0.00	219.60	CHILD SUPPORT		202.62	3,939.30	C 109070301072		846.72		
DENTAL											0.00	347.40									
Total Pre-Tax											-24.98	-347.40									
Total											1,351.81	20,338.29	Total Per Deduction		202.62	3,939.30					
Earnings										Pre-Tax		Total Taxes		After Deductions		EO Net Pay					
Current										1,376.79	1,351.81	302.47	202.62		846.72						
YTD										13,767.99	20,338.29	4,649.45	3,939.30		12,648.54						
Total Current Net Pay														846.72							